and Young Child Feeding practices is also a major thrust area in RCH Phase-II in partnership with Ministry of Women and Child Development.

(3) Emphasis is being given to strengthen the supplementation of micronutrients programme; Vitamin A and Iron under RCH-II.

(4) Monthly Health and Nutrition days are being organized in every village with the help of the Anganwadi Workers, ANM Auxiliary Nurse Midwife and the ASHA (Accredited Social Health Activists).

(5) Advocacy through Mass Media.

NGOs in Rajasthan

1276. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of Non-Governmental Organizations (NGOs) pertaining to Health and Family Welfare are at present working with his Ministry who are in receipt of the Central Funds particularly in Rajasthan State;

(b) whether these NGOs are regularly submitting to Government the required utilization certificates in respect of projects and funds allocated to them; and

(c) if not, the action Government have taken or propose to take against such defaulting NGOs during the last two years, till date and the details thereof, NGO-wise and State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) The information is being collected and will be laid on the Table of the House.

T.B. deaths in Jharkhand

1277. MS. MABEL REBELLO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the annual death in Jharkhand due to T.B.;

(b) the percentage of people suffering from T.B. in Jharkhand;

(c) whether any research has been conducted on such high rate of T.B. prevalence in the State;

(d) whether there is any correlation with mining pollution and malnutrition with T.B. and if so, the steps Government propose to take to overcome these problematic diseases;

(e) whether it is a fact that 78 per cent population of the Jharkhand is passive carrier of T.B.; and

(f) whether it is also a fact that one citizen of Jharkhand dies every 20 minutes on account of T.B.?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The annual deaths due to TB among patients registered under RNTCP at the national level are under 5% (4.3% in 2005).

The year-wise death due to TB among patients registered under RNTCP for the last 3 years in the State of Jharkhand is given in Statement (*See* below).

(b) As per the National Annual Risk of TB infection (ARTI) survey conducted in 2000-2003 the ARTI in East Zone, in which the State of Jharkhand is located, was estimated at 1.3%. This translates into an estimated 65 new sputum positive cases per 100,000 population per year This totals to nearly 19,000 new sputum positive cases occurring in the State annually. It is further estimated that there are nearly 175 TB cases (all forms of TB-new and retreatment cases) per 100,000 population, totalling to nearly 51,000 TB cases in the State. This amounts to 0.18% of the population suffering from TB in Jharkhand.

(c) No State specific TB prevalence research has been undertaken in Jharkhand.

(d) There is no conclusive evidence to suggest direct correlation between mining and TB incidence.

As a result of exposure to dust in the mining industry, the workers are known to have increased risk of respiratory illness including asthma, chronic bronchitis, emphysema and chronic obstructive lung diseases. These conditions also predispose to recurrent bacterial infections. But as a occupational disease, due to associated factors like poor socio-economic and living conditions (overcrowding) of workers working in such industry, these workers are thus at increased risk of acquiring TB infection. Poor

nutritional status further reduces individual's immunity to fight infection, including TB.

The RNTCP has forged partnership with the Ministry of Mines and Ministry of Coal to deliver RNTCP services through their health facilities. The programme has established Microscopy centres and DOT centres wherever appropriate or have built linkages with the general health system to ensure access to free TB diagnosis and treatment services.

(e) No Sir. Available evidence from population based surveys conducted in the country, estimate that about 40% of the population is infected with TB bacilli. Of these only 10% breakdown to active TB disease in their life time.

(f) No Sir.

Statement

Deaths due to TB among patients registered under RNTCP in the State of Jharkhand

State	2002	2003	2004	2005
Jharkhand				
No. of patients registered for treatment	5470	8714	17404	26154
Deaths due to TB among registered cases	81	177	357	990
TB Case fatality rate	1.5%	2.0%	2.1%	3.8%

Anti-HIV Gel

1278. SHRI JANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether trials of anti-HIV gel on women were being conducted in the country;

(b) if so, the details thereof;

(c) whether the trials have since been stopped; and

(d) if so, the reasons therefor?